

Appendix H

TRAINING NOMINATION PROCESS FOR GREAT BASIN, OUT-OF-GEOGRAPHIC AREA AND NARTC COURSES

The ITOC receives nominations for numerous courses/workshops sponsored by the Great Basin, other Geographic Areas, and NARTC. To process nominations quickly, please follow the guidelines outlined below.

- ★ **The representative from each Training Cooperative solicits and collects these nominations from local units, compiles the nominations by course and local unit priority, and submits them to the Idaho Zone Training Sub-Committee.**
- ★ **These nominations are due to the Idaho Zone Training Sub-Committee Chair by October 1st.**
- ★ **The Idaho Zone Training Sub-Committee consists of the ITOC Board of Directors and one representative from each training cooperative (i.e. SWIFT, NCTC, EFTC, SCTC)**
- ★ **Idaho Zone priorities are due to the Great Basin Training Committee by the last Tuesday and Wednesday of October.**

The process for submitting course nominations:

1. The Local Agency Training Representative (LATR) will review the nominations for completeness and accuracy, including meeting all prerequisite experience and training (*For specific information on completing the NWCG training nomination form, see the next section*). The LATR will enter the nominees into the ITOC Training Template (*This template is in the electronic format from the ITOC Chair*).
2. The LATR will prioritize all agency nominations and include this in the training template.
3. Verified NWCG training nominations will be sent and the template will be e-mailed to the Local Training Cooperative Representative (LTCR).
4. The LTCR will consolidate all training nominations and submit them to the ITOC Chair by the deadline. They will also send the training templates via email it to the ITOC Chair (Chair).
5. The Chair consolidates all the training nominations and the training templates and prepares them for the Idaho Zone Training Sub-Committee meeting.
6. The Idaho Zone Training Sub-Committee reviews and prioritizes all zone nominations.
7. The ITOC Representative for Great Basin Training Committee will take the Idaho Zone nominations to the Great Basin Training Committee meeting the end of October.

Late nominations will be accepted only on extenuating circumstances through the channels described above. Nominations sent directly to any Geographic Area Training Units will not be accepted.

For additional information on Great Basin's nomination process, view their website at http://nationalfiretraining.net/gb/great_basin_nomination_process.htm

NWCG training nomination form completion

Complete, accurate, and legible nominations are required. The nomination form that is to be used can be downloaded from the National Wildfire Training web site at:

<http://www.nationalfiretraining.net/>

Nominations submitted that are not complete, illegible or do not meet the course prerequisites, will be returned to the Local Training Cooperative representative.

The individuals completing nomination forms must refer to the most current version of the Field Manager's Course Guide and other applicable agency regulations for information on prerequisite training and experience. A copy of most of these documents can be downloaded from the National Fire Training Website at:

<http://164.159.185.38/pms/training/training.htm>

The LATR is responsible for verifying that all training and experience prerequisites have been met before the nominations are submitted to the LTRC.

The following pages provide a visual image of the nomination form and instructions on how to complete it correctly. In addition, a visual image of the ITOC Training Template is included. Electronic copies of this template are available through the ITOC Chair.

NWCG INTERAGENCY TRAINING NOMINATION AND AGREEMENT TO COLLECT FUNDS									
INSTRUCTIONS: Complete Part I. Complete PART II only if there are charges for the training.									
Part I TRAINING NOMINATION									
Course Number		Course Name				PRIORITY _____ of _____			
Complete No.		Complete Name							
Course Date(s)		Course Location				Course Tuition (if required)			
Session Dates		Session Location				Session Cost, if applicable			
Course Coordinator Name (First Last)				Coordinator Phone (Voice/Fax)		Coordinator E-Mail			
Session Coordinator				Coordinator phone no.		Coordinator email			
Nominee's Name (First MI Last)						Date Submitted			
Employee's full name						Date submitted to local training rep.			
Working Job Title		Employee's working title				E-Mail			
Agency Name		Name of Agency				Fax			
Home Unit		Name of home unit				Nominee's Mailing Address (if different)			
Street		Home unit's address				Street		Employee's address, where they wish to receive pre-work, letters of acceptance.	
City		State		City		State			
Zip		Telephone		Zip		Telephone			
List training completed and dates pertinent to this course:									
Using the Field Manager's Course Guide and applicable agency regulations to assist, list all the prerequisite training completed including the dates.									
List your past qualifications pertinent to this course:									
Using the Field Manager's Course Guide and applicable agency regulations to assist, list all the prerequisite experience completed including the dates.									
Nominee's Signature: (I will notify the Unit Training Representative if I am unable to attend.)									
Employee's signature (can be an electronic signature: /s/ Smokey Bear)									
Supervisor's Signature (I certify the nominee meets the prerequisites, or if not met I will put the reasons for attending the course in Remarks.)									
Supervisor's signature (can be an electronic signature: /s/ Smokey Bear)									
Remarks:									
Any additional information that is pertinent to this employee's nomination for the specified course.									
PMS 921-2 (799)					NFES-2131 Nom form				

This section must be completed regardless of agency affiliation. Complete and accurate charge codes are required as well.

Course Name: **Course's name**

Nominee Name: **Employee's full name**

PART II AGREEMENT TO COLLECT FUNDS(Complete only if there is a tuition charge)

Please check the section appropriate to the legal authority to collect monies and complete the address/signature block. This form must be signed by an individual with authority to sign agreements and obligate the funds listed. Note: Tribal governments are not covered by the Intergovernmental Cooperation Act of 1968.

NON-FEDERAL AGENCIES: Contractor, states, local governments engaged in fire suppression and protection of public lands. This training, payment, and collection is duly authorized under the Intergovernmental Cooperation Act of 1968 as amended by the act of September 13, 1982 (P.L. 97-258), Section 6505. The NWCG Interagency Training Nomination constitutes written request and it is understood the bill for the training will consist of tuition plus all other identifiable costs as provided by law. Authorizing signature is also certifying services requested cannot be procured reasonably and expeditiously through ordinary business channels and funds are available. Provider's signature certifies the agency is offering similar services for its own use.

COMPLETE CHARGE CODE: (Include required fiscal references)

OTHER FEDERAL AGENCIES: This training, payment, and collection is duly authorized under Section 601 of the Economy Act of June 30, 1932 (31 USC 1535) as amended. The NWCG Interagency Training Nomination constitutes the required written request and it is understood the bill for the training will consist of tuition plus all other identifiable costs as provided by law. Authorizing signature is also certifying services requested are in the best interest of the United States; cannot be procured by contract as conveniently or cheaply from a commercial source and appropriate funds are available for this purpose. Provider's signature certifies the agency is offering similar services for its own use.

COMPLETE CHARGE CODE: (Include agency location)

Agreement Number: _____

SAME AGENCY AS PROVIDER: The NWCG Interagency Training Nomination constitutes agreement to pay charges as outlined in nomination materials. Authorizing signature certifies funds are available for this purpose.

COMPLETE CHARGE CODE: (Include unit identifiers)

ADDRESS/SIGNATURE:

Billing address if different than Sponsor or Agency Address:

AUTHORIZED TO EXPEND FUNDS
LISTED ABOVE:

Supervisor's signature

Signature

Date

AGREES TO PROVIDE TRAINING
REQUESTED:

Signature

Date

Supervisor's title

Title

Title

ITOC Training Template

Electronic copies of this template are available through the ITOC Chair.

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Current Needs												
2	Training Unit	Course	Date(s)	Location		Org	Employee	Personal	Unit	State	Zone	Nom	Selected
3					Unit	Code	Name	Priority	Priority	Priority	Priority	In	Student
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Registration Information

Tuition: All students/trainees are charged tuition for Great Basin training. Agencies will be billed tuition based on student/trainee selection to a course, not attendance. For additional information on Great Basin Registration information, see:

<http://www.nationalfiretraining.net/gb/catalog/2003Registration%20Information.pdf>

Student Selections

Course rosters can be found on the Geographic Area Training Unit web site that is hosting the course. This is usually complete by mid December. For access to the Geographic Area Training Sites, go to the National Fire Training site at:

<http://www.nationalfiretraining.net/> There are links to all Geographic Area Training Unit sites. Most of these have a button at the top of their page entitled “Selections”.

Inability to Attend

If an employee finds that he/she is not able to attend and has been accepted, notification must be made to the local unit training coordinator as soon as possible. The training coordinator will notify the course coordinator. ***The vacant spot will be given to the next person on the wait list. The unit may not substitute one employee for another. If cancellations are received 6 weeks prior to the start of the course, tuition will not be charged.***